PART B - FEE(S) TRANSMITTAI

	(NON	4 2005 B	e(s), to: <u>Mail</u> or <u>Fax</u>	Mail Stop ISSUF Commissioner for P.O. Box 1450 Alexandria, Virg (571) 273-2885	or Patents Jinia 22313-1450	
INSTRUCTIONS: This fo appropriate. All further co- indicated unless corrected maintenance fee notification	rm should be used for tran rrespondence including the below or directed others in ns.	smitting to ISSUE Patent France order Factories I, by (a)	FEE and PUBLIC ers and notification specifying a new o	CATION FEE (if requ of maintenance fees v orrespondence address	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a separate	should be completed whe correspondence address arate "FEE ADDRESS" i
•	CE ADDRESS (Note: Use Block 1 for	any change of address)		papers. Each addition:	mailing can only be used fi is certificate cannot be used al paper, such as an assignme of mailing or transmission.	or domestic mailings of for any other accompanyi ent or formal drawing, m
COOLEY GODY ATTN: PATENT (11951 FREEDOM ONE FREEDOM (RESTON, VA 201	3	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsin transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's na.				
16/2005 MBEYENE2 0000					· · ·	(Signatur
						(Dai
C:1501 C:1501 C:1501 C:1501	1400.00 OP	F:	IRST NAMED INVEN	JTOP	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/820,707	04/09/2004		Matthew Isom	·····	GRAY-024/01US	8741
APPLN. TYPE nonprovisional	SMALL ENTITY YES	ISSUE FEI	Е Р	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE 11/14/2005
	•				, \$1000	11/14/2005
EXAMINER LINDSEY, RODNEY M		ART UNIT C		002-069000]	
1 Change of company	ce address or indication of "F	`		the patent front page, li	L Coole	ey Godward LL
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required.	tion (or "Fee Address" Indica or more recent) attached. Us	ation form e of a Customer	(2) the name of a registered attorne 2 registered paten listed, no name w	single firm (having as y or agent) and the nan t attorneys or agents. If ill be printed.	a member a 2es of up to no name is 3	
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless	22) attached. tion (or "Fee Address" Indicator more recent) attached. Use	ation form e of a Customer E PRINTED ON The	(2) the name of a registered attorne 2 registered paten listed, no name w HE PATENT (print ata will appear on	single firm (having as y or agent) and the nam t attorneys or agents. If ill be printed. or type) the patent. If an assign	a member a 2eles of up to no name is 3elee is identified below, the content is a second content in the content in th	document has been filed
CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless	22) attached. tion (or "Fee Address" Indicator more recent) attached. Using the Design of the Desig	e of a Customer E PRINTED ON THE	(2) the name of a registered attorne 2 registered paten listed, no name where PATENT (print ata will appear on a substitute for filin	single firm (having as y or agent) and the nam t attorneys or agents. If ill be printed. or type) the patent. If an assign	no name is 3	document has been filed
CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN 180s, Inc.	22) attached. tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion	E PRINTED ON THE PRIN	(2) the name of a registered attorne 2 registered paten listed, no name when the PATENT (print at a will appear on a substitute for filin RESIDENCE: (CIT Baltimore	single firm (having as y or agent) and the nam t attorneys or agents. If ill be printed. or type) the patent. If an assign g an assignment. TY and STATE OR CO Maryland	no name is 3nee is identified below, the country)	
CFR 1.363). Change of correspond Address form PTO/SB/1. "Fee Address" indicat PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN 180s, Inc. Please check the appropriate	22) attached. tion (or "Fee Address" Indictor more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion IEE e assignee category or category	E PRINTED ON THE PRIN	(2) the name of a registered attorne 2 registered paten listed, no name when the PATENT (print at a will appear on a substitute for filin RESIDENCE: (CIT Baltimore atted on the patent):	single firm (having as y or agent) and the nam t attorneys or agents. If ill be printed. or type) the patent. If an assign g an assignment. TY and STATE OR CO Maryland	no name is 3	
CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 (Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN 180s, Inc. Please check the appropriate 4a. The following fee(s) are	22) attached. tion (or "Fee Address" Indictor more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion IEE e assignee category or category	E PRINTED ON THE PRIN	(2) the name of a registered attorne 2 registered paten listed, no name when the PATENT (print at a will appear on a substitute for filin RESIDENCE: (CIT Baltimore atted on the patent): Payment of Fee(s):	single firm (having as y or agent) and the nant attorneys or agents. If ill be printed. or type) the patent. If an assign g an assignment. TY and STATE OR CO Maryland Individual	no name is 3eee is identified below, the country) orporation or other private gr	
CFR 1.363). Change of correspond Address form PTO/SB/1. "Fee Address" indicated PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN 180s, Inc. Please check the appropriated 4a. The following fee(s) are lissue Fee	22) attached. tion (or "Fee Address" Indicator more recent) attached. Using the properties of the pro	E PRINTED ON THE PRIN	(2) the name of a registered attorne 2 registered paten listed, no name where PATENT (print ata will appear on a substitute for filin RESIDENCE: (CIT Baltimore sted on the patent): Payment of Fee(s):	single firm (having as y or agent) and the nant attorneys or agents. If ill be printed. or type) the patent. If an assign g'an assignment. TY and STATE OR CO Maryland Individual Commount of the fee(s) is er	no name is 3 nee is identified below, the country) orporation or other private gracelosed.	
CFR 1.363). Change of correspond Address form PTO/SB/I. "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN 180s, Inc. Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No s	22) attached. tion (or "Fee Address" Indictor more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion IEE e assignee category or category	E PRINTED ON THE PRIN	(2) the name of a registered attorne 2 registered paten listed, no name where PATENT (print ata will appear on a substitute for filin RESIDENCE: (CIT Baltimore atted on the patent): Payment of Fee(s):	single firm (having as y or agent) and the nant attorneys or agents. If ill be printed. or type) the patent. If an assign g'an assignment. TY and STATE OR CO Maryland Individual C mount of the fee(s) is er it card. Form PTO-203:	no name is 3 nee is identified below, the country) orporation or other private gracelosed.	roup entity Governm

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature

Typed or printed name _

Timoth's D. Ford

<u>47,567</u> Registration No. _

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.